

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|--------|
| FEE DETERMINATION | 657 | 577-85 | |
| O.I.P.E. CLASSIFIER | 12 | 6831 | |
| FORMALITY REVIEW | | | 3/3/69 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
|----------|----------------|
| Final | 9 3 8 1 4 |
| Original | 01 02 03 04 05 |
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| Claim | Date |
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| Final | 4 |
| Original | 83 |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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